

## **Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and Physical Health Personal Risk Assessment**

**EVIDENCE BASED PRACTICES (EBP):** Integrated System of Care; Universal Dual Diagnosis Capabilities; Principles of Empathy and Hope; Motivational Interviewing Approach; Stages of Change Model Design; Strength Based; Skill Building; Solution Focused; Neurochemistry Based Disorders of the Brain; Symptom Identification; Symptom Management; EBP Curriculum Topics, i.e. Nutrition, Stress Management, Cognitive Behavioral, and more...

### **Consistency in the Group Setting**

The importance of *consistency* in a treatment setting can't be overstated. This is especially true when people are placed in vulnerable situations. *Inconsistency* can, at best, increase uncertainty and insecurity for the person receiving services. At worst, unpredictability can create a sense of helplessness while simultaneously decreasing a person's development of self-reliance. In fact, all human beings benefit from a dependable approach in the treatment of chronic disorders. When a person learns they can rely on consistency, they are less stressed and more relaxed. Consistency in the group setting includes the group structure, psychoeducational material, and the approach.

Each agency or facility will have different requirements – such as group receipts or paperwork – however, consistency can still include a structure similar to the following:

1. Group members pick up: a. Clip Board, b. Paper, and c. Pencil/Pen as they enter the room.
2. Group facilitator picks up the group receipts from each person in the group, and/or the group facilitator passes out the sign-in sheet for the group members to sign.
3. Group facilitator provides a Positive Group Beginning, Consistent Psychoeducational Material, Consistent Approach, and a Positive Group Closure.

### **Psychoeducational Groups and Crisis Event Processing (when requested)**

#### **Notes to Facilitator(s):**

1. *THE BASICS, Second Edition* meets the definitions and goals of Psychoeducational Groups, Skill Building Groups, and Cognitive Behavioral Groups.
2. Group participants who have become accustomed to Interpersonal Processing Groups – as well as staff who have facilitated them – may find it a challenge to now facilitate Psychoeducational Groups.
3. Likewise, facilitators who may have followed a more lecture-style education presentation, may find it challenging to now devote at least 1/3rd of group time to specific topic discussions and interactions.
4. Both types of groups (Interpersonal Processing Groups and Psychoeducational Groups) are extremely important, yet each has different goals and structure.
5. The structure of Psychoeducational Groups, Skill Building Groups, and/or Cognitive-Behavioral Groups in no way means that there will not be *interaction* – far from it. It just means that the interactions, discussions, and exercises will be about the topic(s) of each group.
6. Facilitators *may* – or not – still want to allow time in each group for the group member(s) to discuss a crisis that may have occurred since the last group.
7. We do know, of course, that *every* person in group is typically experiencing many challenges each and every week; however, most of these incidents are often best resolved in ways other than group time where the event does not pertain to every group member.
8. Suggested responses to a challenge, problem, or crisis can also include suggesting the person contact their primary care provider; schedule a 1:1 appointment; reschedule their next 1:1 to an earlier time; or, meet with the facilitator after group to explore options and develop a plan.
9. A facilitator would, of course, not “*grade*” an event as being worthy or not for group time. If a person requests individual time in the group, then that would be accepted as valid and time allotted at the end of the group.
10. Over time, the group begins to understand the differences between a situation, a challenge, a problem, or a crisis and can make decisions to utilize group time or continue with the current psychoeducational topic.

### **Prepare Professionals**

Suggestions for professionals to prepare themselves for group typically includes:

1. Review all content material, appendices, and/or handouts *prior* to group to avoid a lecturing style.
2. Decide beforehand the *key points* to be covered in each group to produce flexibility for group responses, discussions, or questions.
3. Gain an overall understanding of the content so summarizing is possible in order to create an interactive facilitation style.
4. Determine the group structure to achieve the essential balance between education and discussions.
5. Check group room to be sure there are enough clipboards, pencils or pens, and markers or chalk for the board.
6. Make enough copies of any handouts *before* group.
7. Write any group content on the board *prior* to the beginning of group whenever possible.

## Master Guide & Master Tips to Professionals

Note: *The Master Guide* (located at the beginning of Volume I & II) and the *Master Tips to Professionals* (located at the back of Volume I) have many topics to assist in the group process like Master Tip #39: Suggestions For Managing Handouts For Groups (pages Master Tips 64-67). Other tips include:

1. Master Guide: Interactive Style (pages Master Guide 10-11)
2. Master Tip #1: Suggestions for Beginning Group (pages Master Tips 1-4)
3. Master Tip #3: Empathetic Treatment Approach (pages Master Tips 7-9)
4. Master Tip #4: Promoting Hope (page Master Tips 9)
5. Master Tip #5: Maintaining a Consistent, Nonjudgmental, and Positive Attitude (pages Master Tips 10-13)
6. Master Tip #12: Responding to Requests for Copies of APPENDICES (pages Master Tips 27-29)
7. Master Tip #13: Depth of Psychoeducational Content (pages Master Tips 29-30)
8. Master Tip #14: Group Closure Suggestions (pages Master Tips 30-31)
9. Master Tip #16: Motivational Interviewing (pages Master Tips 31-32)

## Present Curriculum/Topic

1. It is extremely important that each group participant leave every group with more Psychoeducation than they came in with – which may also include discussing a “familiar topic” yet with a “present-day” focus. Psychoeducational Groups are designed to provide education about all areas related to the management of Substance Use Disorders and Psychiatric Disorders. Psychoeducational Groups are not Interpersonal Processing Groups – even though interaction and processing the particular *psychoeducational topic(s)* is essential to individualizing the topic(s) or skill(s) presented.
2. It is recommended that a minimum of 1/3rd of group time be devoted to interaction (therapeutic counseling *topic* discussions). This can be accomplished – depending on the individual style of the group facilitator(s) – by any “present education-interact/discuss – present education-interact/discuss” combination while still structuring the group to include the curriculum/topic education to be covered.
3. The presentation of material will, of course, be modified by the facilitator to match the functioning skills of group participants. It is important to note, however, that *THE BASICS, Second Edition* was written in a conversational language while taking into consideration a wide-range of symptom acuity and severity. Persons with co-occurring psychiatric and substance disorders benefit from learning about their disorders and how to manage them, as do all individuals with any chronic disorder(s). Each group participant will retain what is meaningful to them at the present time.

## Group Beginning Suggestions

A positive group beginning (and ending) is extremely important. There are many ways to begin (and end) a group in a positive way. Suggestions to choose from can include:



1. Reading the Thought For The Day from a meditation book. (Note: Meditation books that also contain an index at the end of the book – such as *Easy Does It* – are helpful in choosing a specific reading that matches the topic(s) presented in group like Self-Esteem.), or
2. Reading an inspirational or humorous curriculum handout from *THE BASICS, Second Edition*, or
3. Practicing a deep breathing or a stretching exercise, *or*
4. Sharing of one thing that each person is grateful for today, *or*
5. Sharing of one positive thing that he/she did that contributed to their recovery in the past few days, *or*
6. Reading an AA Slogan with a brief explanation or AA/NA/Dual Recovery inspirational reading.

\* Recommended Beginning: Breathing Exercise (located on page Master Tips 3)

## Practice Curriculum/Topic

Practicing subject material is the best way participants can internalize and personalize the curriculum content. Practice includes the group interactions, worksheets, exercises, handouts, and content discussions.

**Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and *Physical Health Personal Risk Assessment***  
**Volume I; Subject One; Pages: APPENDIX IA-1 – IA-2; Volume II; Subject Four; Pages: APPENDIX IVB-1, IVB-4, IVB-8, IV-10**

Based on a 2-Hour group: Two 50 minute segments	Time-Frame
Group Beginning	20 Minutes Total
Positive group beginning (suggestions are located on the previous page).	5 Minutes
<ol style="list-style-type: none"> <li>1. Brief Group Introductions: (Note: The <i>interactions</i> in a psychoeducational group are discussions about the <i>topics</i>, not interpersonal processing or case management questions which do not apply to the entire group.) <ol style="list-style-type: none"> <li>a. Ask the group members to tell the group their name.</li> <li>b. Welcome any group members who are new to this group or phase.</li> </ol> </li> <li>2. Crisis Processing (when requested and optional): <ol style="list-style-type: none"> <li>a. Ask the group if anyone has experienced a crisis since their last group, and if they need/want additional time in this group to discuss it, i.e. what happened, how they managed the crisis, and/or explore options and develop a plan.</li> <li>b. Let the person(s) know that you will allow time at the end of this group for them to share their experience and receive support from their fellow group members.</li> </ol> </li> </ol>	10 Minutes 
<p><u>Summarize Introduction of the Group Topic and Why It's Important:</u></p> <p>Sometimes alcohol is not thought of as a <i>drug</i>. Alcohol, however, is definitely a drug. In fact, alcohol is the oldest and best-known drug in the depressant class of psychoactive substances. It acts as a powerful depressant on the central nervous system and abuse can have profound effects on mental health in the areas of brain and thinking, personality and mood, and behavior.</p> <p>Alcohol has serious effects on physical health because it easily penetrates into almost every organ, tissue, and cell of the body. Continued abuse begins to chip away at the health of the organs of the body over time. Alcohol also compromises the immune system leaving people vulnerable to a host of diseases like cancer. The abuse of alcohol during pregnancy can affect the infant through their adulthood. The extent of this effect will depend on the amount and frequency of use, as well as the vulnerability of the unborn child to psychoactive substances.</p> <p>Today we will talk about the effects of alcohol on mental health, the effects of alcohol on physical health, and a brief overview of FAS (Fetal Alcohol Syndrome) and FAE (Fetal Alcohol Effect). In the second part of this group we will discuss the <i>PHYSICAL HEALTH PERSONAL RISK ASSESSMENT</i> to give each of you an opportunity to see how psychiatric and substance use disorders may affect your personal health.</p> <p><u>The goal of <i>all</i> the information in this group is not about “scare tactics” – it’s about providing accurate education.</u></p> <p>Always keep in mind that <i>recovery</i> improves mental and physical health...so hang in there!</p>	5 Minutes 

**Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and *Physical Health Personal Risk Assessment***  
**Volume I; Subject One; Pages: APPENDIX IA-1 – IA-2; Volume II; Subject Four; Pages: APPENDIX IVB-1, IVB-4, IVB-8, IV-10**

**To the Facilitator(s):**

1. There is a lot of information in this lesson, however, it is not intended to be covered in detail or in its entirety.
2. This group includes a WORKSHEET HANDOUT of PHYSICAL HEALTH *PERSONAL* RISK ASSESSMENT which is much more important than covering all the facts about the effects of alcohol on mental and physical health or FAS & FAE.
3. Leaving time for the worksheet and discussion can be accomplished by paraphrasing the material, highlighting the main points, or choosing to focus on specific sections while skipping others altogether.

Psychoeducation Part I: Topics & Focus	Pages & Location	Presentation Suggestions	Time- Frame
Effects of Alcohol on Mental Health	APPENDIX IA-1 – IA-2	Discuss, mention, or name <i>some</i> of the specific effects of Alcohol on Mental Health in the areas of: 1. Brain and Thinking, 2. Personality and Mood, and 3. Behavior	30 Minutes

**Skill Building Exercise and Discussion - Suggestions for topic discussion:**

**To the Facilitator(s):**

1. Choose any questions you wish for the discussion in the section To the Group which gives a few examples below.
2. One of the skills being developed is self-awareness. The point of the discussion would be for participants to identify the areas – if any – they personally relate to.
3. Briefly summarize the effects of alcohol on mental health from each category of Brain and Thinking, Personality and Mood, and Behavior.

**To the Group:**

1. What effects do you personally relate to?
2. What have you experienced in the Brain and Thinking category? *Profound Mental Confusion?...Yet?*
3. What have you experienced in the Personality and Mood category? *Loss of Emotional Control?...Yet?*
4. What have you experienced in the Behavior category? *Isolation? Increased Risk Taking Behavior?...Yet?*

Psychoeducation Part I: Topics & Focus (continued)	Pages & Location	Presentation Suggestions
Physical Complications of Alcohol Abuse or Dependence	Back of Subject Four	See suggestions below.

**Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)**


**To the Facilitator(s):**




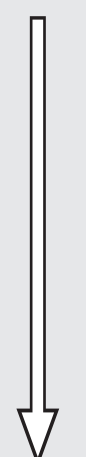
1. Refer to the handout at the back of Subject Four titled “*Physical Complications of Alcohol Abuse or Dependence.*”
2. You may choose to give each person a copy of the handout to refer to and then to take home for further information, *or*
3. Verbally go over *some* of the sections in the handout showing the systems affected by the chronic effects of the drug alcohol – like Mouth, Gastrointestinal, Cardiovascular, etc.
4. Again this information is not intended to be covered in any detail in this particular group.



## Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and *Physical Health Personal Risk Assessment*

Volume I; Subject One; Pages: APPENDIX IA-1 – IA-2; Volume II; Subject Four; Pages: APPENDIX IVB-1, IVB-4, IVB-8, IV-10

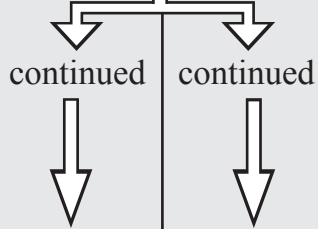
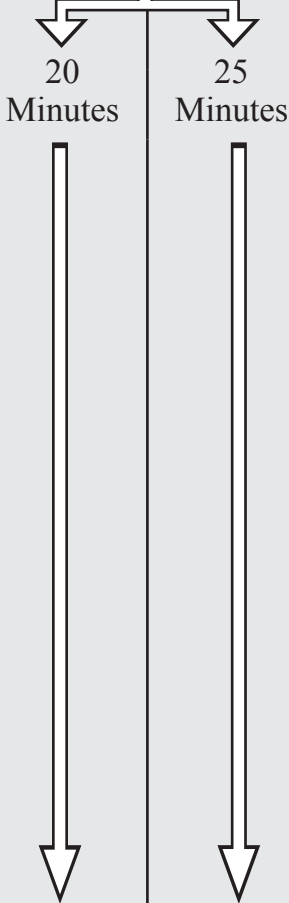
Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)		Time-Frame without Crisis Processing
<b><u>To the Group:</u></b> 1. What areas of physical complications – if any – do you personally relate to from the chronic effects of the drug alcohol? 2. What health problems <i>might</i> you experience in the future? For example: a. Do you throw up from time to time when you've been drinking? Do you think you might have a problem with your throat in the future? b. Do you have heartburn or upset stomach? Do you think you might have stomach problems in the future? c. Do you have bronchitis regularly? Might continued drinking lead to more serious pulmonary problems or healing problems? d. Do you experience the shakes? In the future might you be susceptible to seizures? Might you have neurological problems? e. Do you have accidents from time to time related to drinking? Falls? Car accidents? Others? What physical injuries might you experience in the future? 3. What area(s) of physical health would be the highest risk for you personally – <i>now</i> or in the <i>future</i> ?		continued 
<b>Break</b>		<b>10 Minutes</b>

Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
<b><u>To the Facilitator(s):</u></b> 1. The information in APPENDIX IVB on FAS & FAE spans twelve pages so, of course, it won't be possible to discuss this comprehensive education in this time-frame. 2. The reason it is <i>not</i> recommended that any actual symptoms of FAS or FAE be given in this time-frame is because there isn't enough time to provide the <i>hopeful education</i> as a balance. 3. In fact, FAS & FAE will actually be covered in detail in another lesson plan so only a few paragraphs will be summarized in this particular group. 4. It <i>is</i> strongly recommended that only the suggested sections be discussed since these sections are meant to simply introduce this topic, provide a brief amount of education, and provide hope.			 10 Minutes	 15 Minutes
Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effect (FAE) Are Sensitive Topics	APPENDIX IVB-1	Summarize the two paragraphs.		
Recovery and Hope	APPENDIX IVB-4	Summarize three paragraphs.		
The Path to FAS or FAE Varies	APPENDIX IVB-8	1. Summarize one paragraph. 2. Summarize the five points in the table in the text.		



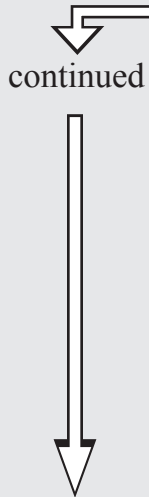
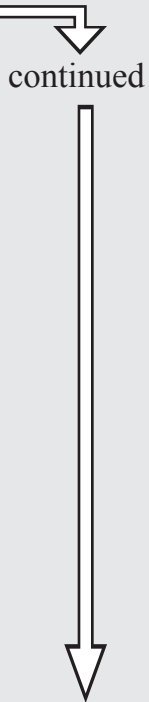
# Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and *Physical Health Personal Risk Assessment*

Volume I; Subject One; Pages: APPENDIX IA-1 – IA-2; Volume II; Subject Four; Pages: APPENDIX IVB-1, IVB-4, IVB-8, IV-10

Psychoeducation Part II: Topics & Focus (continued)	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
Self-Forgiveness Is Key to Healing Parent and Child	APPENDIX IVB-8 & IV-10	<ol style="list-style-type: none"> <li>Summarize only the one paragraph at the bottom of page APPENDIX IV-8.</li> <li>Summarize only the first paragraph at the top of page APPENDIX IV-10.</li> <li>If any group member would like additional information on this topic, it is recommended they discuss this with their primary provider.</li> </ol>		
Psychoeducation Part II: Topics & Focus	Pages & Location	Presentation Suggestions	Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
PHYSICAL HEALTH <i>PERSONAL</i> RISK ASSESSMENT	Back of Subject Four	See below for presentation suggestions.		
<b>Skill Building Exercise and Discussion - Suggestions for topic discussion:</b>				
<b><u>To the Facilitator(s):</u></b> <ol style="list-style-type: none"> <li>You may choose to: <ol style="list-style-type: none"> <li>Give each group member a copy of the 2 page WORKSHEET HANDOUT to work on in group and then to take home, <i>or</i></li> <li>Make a transparency of the WORKSHEET HANDOUT to show on an overhead projector or put the information on the board while asking for verbal examples and input from the group, <i>or</i></li> <li>Verbally discuss the thirteen questions in the WORKSHEET HANDOUT while asking for comments and interaction from group members.</li> </ol> </li> <li>You will notice that this WORKSHEET HANDOUT is a risk assessment for co-occurring psychiatric and substance disorders and not just on alcohol.</li> <li>First, it is suggested that you read the two paragraphs on page 1 of the WORKSHEET HANDOUT as an introduction to the assessment.</li> </ol> <b><u>To the Group:</u></b> <ol style="list-style-type: none"> <li>We will now discuss your “PHYSICAL HEALTH <i>PERSONAL</i> RISK ASSESSMENT.”</li> <li>Please offer answers and input to the thirteen questions we are covering today since the input of each member in the group will be helpful to the entire group.</li> <li>As you brainstorm as a group, please take notes (or fill in your handout) of the answers to the questions that apply to you personally.</li> <li>What comments do you have to the following questions: <ol style="list-style-type: none"> <li>What mental health symptoms are causing you concern?</li> <li>How does that affect your physical health or self-care?</li> </ol> </li> </ol>				

# Alcohol: Effects on Mental Health, Physical Health, FAS & FAE and Physical Health Personal Risk Assessment

Volume I; Subject One; Pages: APPENDIX IA-1 – IA-2; Volume II; Subject Four; Pages: APPENDIX IVB-1, IVB-4, IVB-8, IV-10

Skill Building Exercise and Discussion - Suggestions for topic discussion: (continued)		Time-Frame with Crisis Processing	Time-Frame without Crisis Processing
<b>To the Group: (continued)</b> <ol style="list-style-type: none"> <li>What is your primary drug of abuse?</li> <li>What are the physical health problems associated with abusing that specific drug?</li> <li>How do you use that drug?</li> <li>What are the physical problems that you might have related to the <i>way</i> you use your drug?</li> <li>What are your substance abusing patterns that put you at physical risk?</li> <li>What illness show up in your family system that you may be genetically susceptible to?</li> <li>Putting it all together (when you add the physical problems that are related to mental health symptoms, drugs of abuse, methods of use, patterns of use, and family history), what areas are the greatest risk to your <i>present</i> or <i>future</i> physical health?</li> <li>What goals do you have for improving your physical health?</li> <li>What is your first step in beginning this goal or plan?</li> <li>What has gotten in your way of improved physical health in the past?</li> <li>What will you do differently this time to achieve your goals for physical health?</li> </ol>			
<b>Crisis Processing</b>		<b>Time-Frame</b>	
<ol style="list-style-type: none"> <li>Ask the group member(s) to tell the group what happened.</li> <li>Explore options and/or develop an immediate plan for coping.</li> <li>Allow the group to offer support.</li> </ol>		10 Minutes	
<b>Group “Paper Work”</b>		<b>Time-Frame</b>	
Group participants fill out Group Notes.		5 Minutes	
<b>Group Closure</b>		<b>Time-Frame</b>	
<ol style="list-style-type: none"> <li>Read a daily meditation for the day or inspirational reading of your choice, <i>or</i></li> <li>Ask each group member to state something they are grateful for today, <i>or</i></li> <li>Ask each person to say two things they will do today to protect their recovery, <i>or</i></li> <li>Read SELF-FORGIVENESS BY MERCEDES ALEJANDRO located on APPENDIX IVB-9 to the group.</li> </ol>		5 Minutes	